

REMARKS

This application has been carefully reviewed in view of the above-referenced Final Office Action, and reconsideration is requested in view of the following remarks.

Request for Removal of the Finality of the Rejection

The present Office Action has been deemed final, however, it is submitted that the finality is premature. Claim 20 was originally rejected as anticipated by David of record. Currently, claim 20 is rejected as obvious based on the combination of David and Flego of record. However, claim 20 remains unamended. Accordingly, Applicants' actions did not necessitate the new grounds for rejection, and the finality is premature per MPEP 706.07(a). Withdrawal of the finality of the rejection is therefore respectfully requested.

The Rejections Under 35 U.S.C. §103

Applicants have reviewed the above Office action and in response thereto, have substantially amended all remaining claims. The independent claims now call for changing from a first mode (entertainment) to a second mode (remote communication) by either a manual selection or by commencing to receive physiological data. This feature is not believed to be taught or suggested in the cited art. Additionally, the independent claims now also call for merging physiological data with patient records in one or more databases. Further, the independent claims now specify that a videoconferencing function is carried out during the remote communication mode. These amended claims, when their features considered as a whole, are believed to be neither taught nor suggested by the cited art.

The Flego reference of record is used for its teaching of switching between an entertainment mode and a medical mode. It is noted that in Applicants' claims, the remote communication mode is used for both videoconferencing functions and to transmit collected physiological data. In Flego, there does not seem to be a corresponding mode of operation. Flego's device controls a medical treatment – namely extracorporeal blood treatment. Flego provides an entertainment mode of operation for receiving entertainment content, and a medical mode of operation in which alarm conditions can be brought to the patient's attention. The

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patient can also apparently control the treatment parameters during this medical mode. Applicants have been unable to identify a mechanism for entering the medical mode other than either an alarm condition or a selection by the patient by manipulation of a user input device (col. 4, lines 40-43). There is no teaching or suggestion that one could switch to a data communication mode by simply beginning to collect data, per the amended claims. It is further noted that the claims now call for the remote communication mode which transmits collected data is also a mode in which videoconferencing functions are carried out. Accordingly, it is submitted that the presently amended claims fully distinguish over the cited art.

In addition to the above, it is noted that claim 8 calls for a content server forming a part of the interactive appliance. Applicants do not find this teaching in the cited art. Further, numerous claims have been cancelled in order to simplify the issues.

Finally, it is noted that many of the rejections of the present Office Action indicate that certain claims are "encompassed within the limitations of" other claims. While similarities exist among the claims, each and every element and each word of every claim must be considered in making a determination of patentability. Accordingly, Applicants earnestly solicit full consideration of the language of each claim.

With these amendments, the claims are believed to distinguish over the cited art. Applicants respectfully request reconsideration and allowance of the remaining claims.

The undersigned wishes to invite the Examiner to contact him if further issues remain to be resolved. The undersigned can be contacted at the telephone number below.

Respectfully submitted,



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